

**CITY OF TULARE  
APPLICATION FOR DRIVER PERMIT AND RENEWAL  
TAXICABS/MOTOR VEHICLES FOR HIRE**

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☐ Application for Driver Permit    or    ☐ Renewal for Driver Permit

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State: \_\_\_\_\_

Name/Address of employer/owner by whom you are to be employed as a driver:

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Past experience in operating vehicles requiring chauffeur/ passenger-type license:

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Name/Address of employer(s) during the past three years:

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Have you ever had a chauffeur/passenger driver's license revoked?    ☐ Yes    ☐ No

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*The information supplied above is true and correct to the best of my knowledge. I understand that any false or incorrect information or statement on this application will be cause for denial of the permit requested.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Employer/Owner: \_\_\_\_\_ Date: \_\_\_\_\_  
(for whom applicant will be driving)

**Please submit the following with this application:**

- \$10 fee for Application for Driver Permit and Renewal
- Valid California Driver's License and/or Chauffer's License
- Current Department of Motor Vehicles driving history report
- Test results for alcohol and controlled substances
- Two recent "passport size" photographs no larger than two inch by two inch
- Application for Live Scan fingerprinting and associated fees

**Return completed form and supporting documents to:  
Tulare City Clerk's Office, 411 E. Kern Avenue, Tulare 93274  
If you have any questions, do not hesitate to contact us at (559) 684-4200.**

**(CITY OF TULARE USE ONLY)**

**Police Department Recommendation:**     ☐ **Approve**     ☐ **Deny**

**Reason for Denial:**

**Signature:** \_\_\_\_\_  
   **Police Chief**

**Date:** \_\_\_\_\_

**City Manager Recommendation:**     ☐ **Approve**     ☐ **Deny**

**Signature:** \_\_\_\_\_  
   **City Manager**

**Date:** \_\_\_\_\_